

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FEB 01 2010 OIC 2/25/10

PRINTED: 01/21/2010
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445174	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 01/11/2010
NAME OF PROVIDER OR SUPPLIER BROOKHAVEN MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 2035 STONEBROOK PLACE KINGSPORT, TN 37660		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
K 038 SS=F	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1</p> <p>This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure exit access is arranged that exits are readily accessible at all times in accordance with 7.1.</p> <p>The findings include:</p> <p>Observation on January 11, 2009 at 1:00 p.m. revealed exit egress leading to the exterior smoking area was obstructed with a large temporary fifteen feet by fifteen feet (15x15) wall built from 2x4 wood with a plastic wall cover and has no clear exit egress.</p>	K 038	<p><u>K038:</u></p> <p>The temporary wall located at the exterior smoking area has been removed. Exit egress at the exterior smoking area is readily accessible.</p> <p>The Maintenance Director inspected the remainder of the facility and confirmed that all egresses were readily accessible.</p> <p>The Maintenance Director will include egress inspections with monthly Preventative Maintenance and Life Safety Task Schedule.</p> <p>The Maintenance Director will report any egress issues to the facility's Administrator as well as to the facility's Safety Committee.</p>	2/25/10	
K 067 SS=F	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2</p> <p>This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure dirty areas had an operable exhaust.</p> <p>The findings include:</p>	K 067			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

[Signature]

Administrator

1.29.10

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 067	Continued From page 1 Observation on January 11, 2009 at 1:00 p.m. revealed the enclosed exterior smoking areas consist of two (2) electric box fans and was not provided with an operable exhaust system leading to the exterior portion of the building.	K 067	<u>K067:</u> The enclosed temporary exterior and related items at the smoking area have been dismantled and removed. The Maintenance Director inspected the remainder of the facility and confirmed that heating, ventilation and air conditioning are in compliance and are installed in accordance with the manufacturer's recommendations. The Maintenance Director will include heating, ventilation and air conditioning inspections with monthly Preventative Maintenance and Life Safety Task Schedule. The Maintenance Director will report any heating, ventilation and air conditioning issues to the facility's administrator as well as to the facility's Safety Committee.	2/25/10	